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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

 GERMANY 102 52 325.8 11/11/2002  
 GERMANY 102 57 146.5 12/06/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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|                                                                                                                                                        |                                            |                        |                       |                            |
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| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no                                                        | STATE OR<br>COUNTRY<br>GERMANY             | SHEETS<br>DRAWING<br>2 | TOTAL<br>CLAIMS<br>11 | INDEPENDENT<br>CLAIMS<br>1 |
| 35 USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance |                                            |                        |                       |                            |
| Verified and<br>Acknowledged                                                                                                                           | Examiner's Signature<br><i>[Signature]</i> | Initials<br><i>AT</i>  |                       |                            |

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## TITLE

Probe

|                            |                                                                                                                   |                                                                                                                                                      |
|----------------------------|-------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE<br><br>RECEIVED | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
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☐ 1.18 Fees ( Issue )☐ Other \_\_\_\_\_☐ Credit